

**STATEMENT BY
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BEFORE THE

**SUBCOMMITTEE ON AFRICA, GLOBAL HEALTH, GLOBAL HUMAN RIGHTS,
AND INTERNATIONAL ORGANIZATIONS
COMMITTEE ON FOREIGN AFFAIRS
U.S. HOUSE OF REPRESENTATIVES**

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Mr. Chairman,

My name is Nick Kourgialis; I am the Vice President for Eye Health Programs at Helen Keller International (HKI). Thank you for the opportunity to appear before the Committee this afternoon to testify regarding the importance of continued funding for the U.S. government's Neglected Tropical Diseases (NTD) Program, and to highlight the enormous impact that it is having on the health and welfare of individuals living in the world's poorest communities. I also want to thank you for the Committee's continued commitment to improving the lives of millions by helping to eliminate or control the seven most prevalent NTDs targeted by the U.S. government – lymphatic filariasis, onchocerciasis, schistosomiasis, soil transmitted helminths (hookworm, roundworm, whipworm), and trachoma.

Collectively, these parasitic and bacterial diseases blind, disfigure, and disable millions of people in the world's poorest communities, and limit their ability to lead healthy and productive lives. According to the World Health Organization (WHO), NTDs infect more than one billion people - a sixth of the world's population – including an estimated 800 million children who, as a result, suffer from malnutrition, decreased school enrollment and diminished physical and intellectual development. Research has shown that eliminating NTDs can allow millions to climb out of poverty, particularly by increasing access to education and improving their ability to work.

Since its inception, the U.S. government's NTD Program has supported the delivery of more than one billion treatments to approximately 470 million people as part of large scale, integrated disease control and elimination programs in 25 countries. The impressive reach and impact of the program would not be possible without the remarkable public-private partnership with the pharmaceutical sector and the donation of over \$6 billion worth of NTD drugs by

GlaxoSmithKline, Johnson & Johnson, Merck & Co, Inc., Pfizer, Inc. and Merck Serono to countries receiving support from the U.S. Agency for International Development (USAID). We commend the U.S. Congress and USAID for the leadership that has been demonstrated over the past eight years by focusing the attention of the global public health and corporate community on this vital public health issue and for their steadfast commitment to achieving the global control and elimination targets for these debilitating diseases.

Helen Keller International currently offers programs in 21 countries in Africa and Asia, as well as the United States. Co-founded in 1915 by the deaf-blind crusader Helen Keller, HKI is a leading nonprofit organization dedicated to preventing blindness and reducing malnutrition worldwide.

Our programs serve tens of millions of vulnerable people each year. The prevention and treatment of NTDs is a key organizational priority, and one of our most important and far-reaching programs. HKI's early work in NTD control dates back to the mid-1950s, supporting the elimination of blinding trachoma in Taiwan.

HKI also played a pivotal role in the development of the SAFE strategy (Surgery for trichiasis, Antibiotics to treat infections, Facial cleanliness and Environmental improvement) in trachoma control and the Community Directed Treatment with Ivermectin strategy in onchocerciasis control. More recently, with USAID funding, HKI has supported integrated control activities focusing on all seven targeted NTDs in six countries in Africa.

HKI has been the recipient of integrated NTD Program funding from USAID in Burkina Faso, Cameroon, Guinea, Mali, Niger and Sierra Leone. These funds have provided crucial technical, programmatic, and financial support to the Ministries of Health in these countries to

develop integrated approaches and to achieve their NTD control and elimination goals for the targeted diseases.

In 2015, with support from USAID, Helen Keller International will lead a new five-year project aimed at managing morbidity and preventing disability related to blinding trachoma and lymphatic filariasis in Burkina Faso, Cameroon and Ethiopia. Support for trichiasis and hydrocele surgery along with treatment for the painfully swollen limbs caused by lymphatic filariasis is critical to the achievement of the elimination criteria for these disabling diseases by the WHO designated target date of 2020. Without this support, these countries would not have adequate resources to address these needs.

HKI's approach and strength has been to partner with government ministries, particularly of Health and Education, to provide technical assistance and support to the national disease control teams, and to build capacity within countries with the goal of scaling up and creating sustainable systems of care. Throughout this work, HKI emphasizes the ownership of the integrated disease control programs by the country and communities themselves. Our ultimate goal is for Ministries of Health and Education in the countries in which we work to assume clear ownership over these programs. We want to assure that national governments also commit the necessary human and financial resources needed to achieve control or elimination of the targeted diseases.

Several HKI supported countries have made notable progress in reaching specific disease control targets. For example, in Burkina Faso, fifty two percent of endemic districts have already reached the criteria to stop mass treatment for lymphatic filariasis, and eighty three percent of endemic districts have stopped treatment for trachoma. Burkina Faso is on track to stop mass drug administration (MDA) for lymphatic filariasis in all districts by 2018 and by the

end of 2016 for trachoma. Considerable progress has also been made in significantly reducing the prevalence of schistosomiasis and soil transmitted helminths.

Similarly, in Mali, despite the challenges posed by recent political instability and violence, more than ninety percent of districts that required trachoma treatment at baseline have been able to stop drug administration and significant progress is being made in addressing the trichiasis backlog. Due to insecurity in the North of Mali, five out of the six remaining trachoma districts have not been able to be assessed to determine if they have reached elimination criteria.

Trachoma offers a valuable example of what can be achieved through global cooperation. It also highlights the critical importance of continued funding for NTD program implementation activities. Trachoma is the leading infectious cause of blindness in the world. This bacterial infection is transmitted through contact with eye and nose discharge of infected people, particularly young children who are often the principal reservoir of infection. It is also spread by flies which have been in contact with the eyes and noses of infected people. Repeated cycles of infection and inflammation can result in scarring of the inside of the eyelid, causing it to turn inward so the eyelashes scratch the cornea, ultimately causing corneal opacity and blindness through a very painful condition called trichiasis.

According to the most recent WHO report on NTDs, an estimated 232 million people live in areas where trachoma is endemic. More than 21 million people have active trachoma, 7.2 million require surgery for trichiasis, and 1.2 million are irreversibly blind. As primary caregivers, women are far more likely to be repeatedly infected with trachoma, to develop trichiasis, and to lose their sight.

Many of the key components needed to achieve the elimination of trachoma as a global public health problem by 2020 are already in place.

- The Global Trachoma Mapping Project, supported by UK government's Department for International Development (DFID) and managed by Sightsavers is seeking to complete a comprehensive global mapping of trachoma prevalence to guide disease elimination efforts.
- The International Coalition for Trachoma Control has developed critical tools and identified best practices that support the implementation of WHO-endorsed SAFE strategy.
- The International Trachoma Initiative, with support from Pfizer, ensures that the antibiotic Zithromax® is provided to countries seeking to achieve trachoma control and elimination.
- The WHO Alliance for the Global Elimination of Blinding Trachoma by 2020 (GET2020) provides the global advocacy platform and support for country implementation of the SAFE strategy.

The U.S. government's support of country level implementation activities serves as an essential complement to the important commitments outlined above, and is critical to achieving the WHO goal of eliminating trachoma as a public health problem by 2020. Despite their many challenges, all six countries supported by HKI have made significant progress towards global NTD control and elimination targets. Each of these countries has strong National NTD Programs with capable and committed staff, as well as dedicated technical partners. A decrease in USAID funding for the targeted NTDs at this critical time would significantly undermine the ability of the National NTD Programs in these countries to continue their activities and to reach their control and elimination targets.

Furthermore, additional investments in epidemiological assessment and surveillance are also required. As criteria for ending drug administration are met for various diseases on a district-by-district basis in each of these countries, surveillance systems will need to be put into place to ensure that countries are able to identify incident cases or identify recrudescence of transmission. This is particularly true along border regions where countries that have made

significant progress in achieving their elimination targets are linked to countries where the scale-up of drug distribution is far less advanced, and where cross border transmission poses a significant risk.

Mr. Chairman, in your letter inviting me to testify at this hearing you indicated that you would like me to address the funding level for Neglected Tropical Diseases included in the Administration's fiscal year 2016 budget request. In fiscal year 2014 and 2015, the Congress appropriated \$100 million for Neglected Tropical diseases. However, in the fiscal year 2016 budget request the Administration has only requested funding for NTD's at a level of \$86.5 million.

In order to sustain the current NTD program, I hope that the Congress will restore funding in fiscal year 2016 for the targeted NTD program to at least the level provided in fiscal year 2015. I also urge that the emphasis on the seven-targeted NTD diseases be continued. Enormous progress has been achieved over the past eight years in combatting these diseases, but much work remains to be done during this critical phase when elimination goals are within sight.

I am optimistic that funding levels for NTDs will be restored and on that I turn to the words of our organization's founder, Helen Keller, "Optimism is the faith that leads to achievement. Nothing can be done without hope and confidence."

I thank the Committee for your ongoing commitment to global health and especially to the challenges posed by Neglected Tropical Diseases.